

American Legion Membership Application Alexander Hamilton Post 448 • PO Box 14939 • San Francisco CA 94114-0939



Name:	DOB: DD / MMMM / YYYY	
Mailing Address:		
City/State/ZIP:		
eMail:	Phone:	
Please check appropriate branch of service and eligibility date:		
□ US Army □ US Navy □ US Marine □ US Coast Guard □ US Air Force □ Merchant Marines 12/7/41 - 8/15/45 (only eligibility	у)	
□ Gulf War Aug 2, 1990 – cessation of hostilities as determined by U.S. Government □ Panama Dec 20, 1989 – Jan.	31, 1990 $\hfill\Box$ Lebanon/Grenada Aug 24, 1982 – July 31, 1984	ļ
□ Vietnam Feb 28, 1962 – May 7, 1975 □ Korea June 25, 1950 – Jan. 31, 1955 □ WWII Dec. 7, 1941- Dec 31, 1946		
I certify that I served at least one day of active military duty during the dates above and was honorably discharged or a	am still serving honorably.	
Signature:	Date:	
Mail completed and signed application and \$35.00 dues (or \$20.00 for SAL membership) to the address above, or give to Post representative.		